City of Westminster	Westminster Health & Wellbeing Board	
Date:	19 November 2015	
Classification:	General Release	
Title:	Briefing Paper for Like Minded – NWL Mental Health and Wellbeing Strategy – Case for Change	
Report of:	Matthew Hannant, Interim Senior Responsible Officer, Director of Strategy & Transformation (Acting), NWL Collaboration of CCGs Fiona Butler, Clinical Responsible Officer, Chair of NWL Mental Health and Wellbeing Transformation Board, West London CCG Chair.	
Wards Involved:	All	
Policy Context:	Mental health and wellbeing	
Financial Summary:	As the strategy is still being developed, there are not yet any financial implications identified.	
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1. Executive Summary

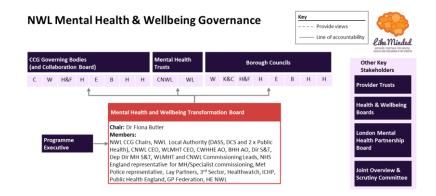
1.1 This report sets out the background to the development of the North West London Mental Health and Wellbeing Strategy Case for Change, as part of the Like Minded Programme. The Case for Change describes a shared understanding of the issues the health and social care sectors face in relation to Mental Health and Wellbeing and the shared ambitions for change. It is designed as a call to action – outlining the areas of work that should be developed in the next phase of the programme.

2. Key Matters for the Board

2.1 The Westminster Health and Wellbeing Board is requested to endorse the Like Minded Case for Change and provide any feedback that can inform development of models of care and support.

3. Background

- 3.1 In June 2014 the NWL Collaboration Board (across the 8 Clinical Commissioning Groups (CCGs)) agreed to build on the previous mental health strategy (called 'Shaping Healthier Lives', 2012-15) and initiate the North West London-wide mental health and wellbeing programme, called 'Like Minded' (2015-2020).
- 3.2 The governance of the programme is through the NWL Mental Health and Wellbeing Transformation Board. The Board was formed in May 2015 and has representation from CCGs, Local Authorities, both Mental Health Trusts, other stakeholders and service users (see governance chart below). The Board oversees and supports the development and implementation of Like Minded. Their role is to identify the most appropriate priorities and solutions for the programme and ensure delivery. It will manage the interdependencies with other related programmes and transformation work (for example, Whole Systems Integrated Care) across the eight boroughs as well as from our service user groups (such as the Making A Difference Alliance who represent mental health services users and their support networks.)



3.3 The first phase of the Like Minded programme focused on the development of a 'Case for Change', which describes the eight major issues identified across North West London relating to mental health and wellbeing, and the ambitions to improve outcomes and experiences (see section 4 below). The 8 issues are summarised in the table below. The Case for Change is built on a wide range of data, people's experiences, best practice and a structured approach to prioritisation, to agree a number of shared priority workstreams.

	Major Issues	Case for Change Ambitions
1.	Too many people face	We will ensure that mental health needs are better
	mental health needs	understood and more openly talked about and we will
	alone.	improve the range of services for people with mental
		illness in North West London.
2.	Not enough people know	We will improve wellbeing and resilience, and prevent
	how to keep mentally	mental health needs where possible, by:
	well.	 supporting people in the workplace;
		 giving children and young people the skills to cope
		with different situations;
		reducing loneliness for older people.
3.	We need to improve the	For people with serious and long-term mental health
	quality of care for those	needs we will:
	with serious and long	 make their care journey simpler and easy to
	term mental health	understand;
	needs.	 develop new, high-quality, services in the community;
		focus care on community based support rather than
		just in-patient care so people can stay closer to home.
4.	Too many people	For those people experiencing depression and anxiety
	experience common	we will:
	mental illness, such as	 Improve how quickly we identify, especially when
	depression and anxiety,	people are not currently receiving other healthcare;
	in silence.	 Improve the quality and quantity of therapy that
		doesn't require medicines.
5.	3 in 4 of lifetime mental	We will ensure that implementation of the national
	health disorders start	strategy for children and young people responds to our
	before you are 18.	local needs.
6.	New mothers, those with	We will improve the care for specific groups in our
	learning disabilities, the	community and support available to those who don't
	homeless and people	always get the mental health care they need within
	with dementia do not get	existing services.
	the right mental health	
	care when they need it.	
7.	Too many people with	We will make sure that physical health and mental
	long term physical health	health are supported for people with existing physical
	conditions do not have	or mental long-term conditions, learning from other
	their mental health taken	work in NW London around the importance of joining
	into account and vice	up care.
	versa.	
8.	Our systems often get in	Make sure that our systems help, rather than hinder,
	the way of being able to	joined up care.
	provide high quality care.	

- 3.4 The Case for Change development was led by the North West London Mental Health and Wellbeing Transformation Board. It has also received input from practitioners, commissioners, voluntary sector service users and carers, some of whom are represented on the Transformation Board through the National Survivor User Network and West London Collaborative.
- 3.5 The Like Minded team have developed a longer narrative Case for Change document, with a supporting short summary. The short summary is presented today for your endorsement, and the longer document is available for download here: <u>http://www.healthiernorthwestlondon.nhs.uk/mental-health</u>.
- 3.6 The key issues for North West London have been identified within the Case for Change, and a number of ambitions for improvement are described. The programme has defined the issues into a number of clear workstreams to ensure we deliver on our ambitions.
- 3.7 These workstreams have been convened with partner involvement and with distributed leadership from across sectors. The next steps for each of these workstreams are set out below:

Workstream	Key update/next steps	
1) Wellbeing and prevention	Workstreams and workplans developed for workplace wellbeing interventions and prevention of conduct disorder, led by Public Health and with input from Frontier Economics. Draft 'Call for Action' papers to be presented to 18 November NWL Mental Health & Wellbeing Transformation Board.	
2) Serious and Long Term mental health needs	Workshops were run throughout September. Current focus is on mapping data and describing current 'as is' state, including current transformation work. A draft Model of Care and Support was endorsed at the 23 October NWL Mental Health and Wellbeing Transformation Board.	
3) Common mental health needs	Initial workshop to be held to scope breadth of work. A detailed review of the data will follow to understand the current 'as is' state for people with common mental health needs.	
4) Children and Young people	Transformation Plan for NHS England Future in Mind developed which presents a united approach to improving the mental health and wellbeing of children and young people across the 8 North West London CCG and LA areas. Plan submitted to NHS England on 16 October 2015. Next steps are to secure NHSE sign-off and develop implementation plans.	

5) Existing projects	Existing mental health projects, such as perinatal and learning disabilities, will be continued and report to the programme's Strategic Implementation & Evaluation Board.	
6) Enablers	Agreement to develop and address enablers with other Strategy & Transformation programmes, in particular Whole Systems Integrated Care and Primary Care.	

4. What this means for Westminster Health and Wellbeing Board

4.1 <u>What this means for Westminster</u>

The workstreams within the strategy each have a different focus, but are likely to impact on a number of services delivered within Westminster:

- Primary care services;
- Community mental health services;
- Inpatient mental health services;
- Public Health services;
- Children & Young People's services (see the NWL Transformation Plan in response to Future in Mind for more information).

Over the coming months the impact will be more clearly defined, through the development of models of care and support with North West London stakeholders, including members of Westminster HWBB. We will provide an update on the draft models of care and support to the Health and Wellbeing Board as they are developed.

We also need to link to the local community services redesign to ensure new models of care being developed by our providers link to our North West London strategy. This includes, for example, working with the new Single Point of Access for mental health services developed by CNWL, launching on 3 November, to ensure this single number and referral process for all mental health referrals improves access to services and makes services user's care journeys easier to understand.

4.2 How we can work with Westminster to deliver a joint approach

Each workstream within the Like Minded strategy has the potential to impact on services delivered by Local Authorities, therefore input from Westminster Council to each workstream is important now and as the programme progresses. We are keen to build on the Whole Systems Integrated Care approach, working closely with all key stakeholders across North West London to develop models of care and scope options for delivery.

4.3 Role of the Health and Wellbeing Board in delivering this strategy

We ask for endorsement of the Case for Change at this stage. When we next present at the Health & Wellbeing Board we will have more detail on the role of stakeholders within Westminster, including members of the HWBB, in delivering the strategy.

4.4 To date, we have presented the Like Minded programme at the following Boards in Westminster:

Forum	Date	Discussion
Central London	11 February 2015	Programme Initiation Document discussed at
CCG		Central London CCG Governing Body Seminar
	9 September 2015	Case for Change presented at Central London
		CCG TRG meeting
	9 September 2015	Governing body endorsement of Case for
		Change
	23 September 2015	Programme update presented at Central
		London CCG User Group
Westminster	21 May 2015	Programme update presented at Westminster
HWBB		HWBB

4.5 In addition, we have:

- Held a meeting for Children and Young people work stream understanding experiences with the Westminster Youth Team (23 March 2015)
- Run a workshop on socially excluded groups in Westminster Central Hall (6 May 2015)
- Held a Community of Interest meeting at One Great George Street, Westminster (1 July 2015)
- Held an 'Innovation Lab' for Serious and Long Term Mental Health Needs at Pimlico Academy, Westminster (22 September 2015).
- Andrew Christie, Tri-borough Director of Children's Services, represents other DCSs within the West London Alliance on the Mental Health and Wellbeing Transformation Board.
- Had attendance from Tri-borough public health teams at workshops and significant input into each workstream particularly the Wellbeing & Prevention workstream.

5. Legal Implications

5.1 The programme will support the co-production of models of care and support, agree outcomes, assess impact of any proposed changes and oversee the production of business cases. While this may lead to proposals which constitute significant service change and therefore potentially formal consultation, it is envisaged that there will also be large parts which can be taken forward without

formal consultation. A key role for the NWL Mental Health and Wellbeing Transformation Board is in quality assuring the development and implementation process. We have a good understanding of the process based on previous consultations such as for Shaping a Healthier Future, and we will build on this knowledge. We have secured legal advice from Capsticks, and will continue to do so.

- 5.2 All NHS bodies proposing a service change must involve the public, patients and staff from initiation through to implementation. National guidance is set out in 'Planning and delivering service changes for patients' (NHSE Dec 2013). This offers a good practice guide intended to help shape local arrangements and to be used in a way that is both proportionate and flexible. Public consultation is required if there is a significant change to the way services are provided.
- 5.3 Any service change large or small needs to comply with the NHS England four tests and demonstrate evidence of:
 - Strong public and patient engagement
 - Consistency with current and prospective need for patient choice
 - A clear clinical evidence base
 - Support for proposals from clinical commissioners

6. Financial Implications

6.1 One of the stated objectives of the programme is to develop improved outcomes – and ensure a financially sustainable system for at least the next 5 years. In working up detailed models with partners, the financial impact will be a key consideration. It is too early to quantify the impact at this stage of the programme therefore there are no financial implications identified yet for the Council. The cost of developing the models, and any financial implications within them, will be met by existing resources.

Please remember that if you wish the information you are providing in this report to remain confidential, we may be able to accommodate you. Please contact <u>apalmer@westminster.gov.uk</u> for guidance.

If you have any queries about this Report or wish to inspect any of the Background Papers please contact:

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APPENDICES:

Improving mental health and wellbeing in North West London Case for Change – a summary

BACKGROUND PAPERS:

Supporting documents can be found in the following web page: <u>http://www.healthiernorthwestlondon.nhs.uk/mental-health</u>